



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
EBISUI	LYNNE	S.	535-5934
MAILING ADDRESS (Street)			FAX
P. O. BOX 3000			535-5944
(City)	(State)	(Zip Code)	
HONOLULU	HI	96802-3000	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

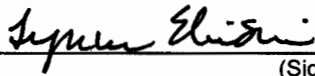
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
THE GAS COMPANY, LLC		535-5934
MAILING ADDRESS (Street)		FAX
P. O. BOX 3000		535-5944
(City)	(State)	(Zip Code)
HONOLULU	HI	96802-3000
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
LYNNE S. EBISUI		535-5934
MAILING ADDRESS (Street)		FAX
P. O. BOX 3000		535-5944
(City)	(State)	(Zip Code)
HONOLULU	HI	96802-3000

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
X Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
X Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
X Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

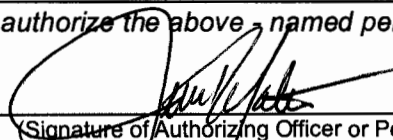


(Signature of Lobbyist)

1/14/2005

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
JIM R. YATES		PRESIDENT	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
THE GAS COMPANY, LLC		535-5908	
MAILING ADDRESS (Street)		FAX	
P. O. BOX 3000		535-5942	
(City)	(State)	(Zip Code)	
HONOLULU	HI	96802-3000	
I hereby authorize the above named person to engage in lobbying activities on behalf of the undersigned.			
		1/18/05	
(Signature of Authorizing Officer or Person Represented)		(Date)	